UTILITY PATENT APPLICATION TRANSMITTAL UNDER 37 CFR 1.53(b)			ATTORNEY DOCKET 85694LMB Customer No. 01333					
To: Commissioner for Patents			Express Mail Label No.					
P.O. Box 1450								
Alexandria, VA. 22313-1450			EV29	353900	8US			
BIOLOGICAL MICROARRAY COMPRISING POLYMER PARTICLES AND METHOD OF USE			Date:	Sept	tember 9.	2003	1 U.S. PTO 1658438	
First Named Inventor (or Application Identifier):							o u.s 1/6584	
Jeffrey W. Leon, et al				·········			0394	
Enclosed are:  1. X Specification			6.		Assignment of t Eastman Kodak		)	
2. Sheet(s) of drawin	ıg(s)		7.		Certified copy o			
3. X Information Disch	osure Statement Und	ler 37 CFR	8.	=	Associate Power	•		
<ul> <li>4. Combined Declaration for Patent Application and Power of Attorney:</li> <li>4a. X New</li> <li>4b. Copy from a prior application (37 CFR 1.63(d) (for continuation/divisional with Box 11 completed)</li> </ul>								
5. Incorporation by Reference (useable if Box 4b is 9. Deletion of Inventor(s).								
					nent attached de		r(s) named	
which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.								
10. If a 111A application prior to examination of the above-identified application, amend the specification at Page 1,								
after the title, by inserting the following:CROSS REFERENCE TO RELATED APPLICATION								
Reference is made to and priority claimed from U.S. Provisional Application Serial No.,								
filed, entitled.								
If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:  11. Continuation Divisional Continuation-in-part (CIP) of prior application No:								
12. X Please address all written communications to Paul A. Leipold, Patent Legal Staff,								
Eastman Kodak Company, 343 State Street, Rochester, NY 14650-2201.								
Please Direct all telephone calls to Lynne M. Blank at 585-477-7418.								
The filing fee has been calcula		NO EVED	<del> </del>	D 4 200		= 1		
FOR: BASIC FEE	NO. FILED	NO. EXTRA	<u> </u>	RATE	FE	\$ 750		
TOTAL CLAIMS	54 - 20 =	34		x 18 =		\$ 612		
INDEPENDENT CLAIMS	2 - 3 =	-1		x 84 =		\$ 0		
MULTIPLE DEPENDEN	IT CLAIM PRESEN	TED		+ 280		\$ 0		
			L	TOTAL	<b>.</b>	\$ 1362		
X Please charge my Eastman Kodak Company Deposit Account No. <u>05-0225</u> in the amount of \$ 1362								
A duplicate copy of this sheet is enclosed								
X The Commissioner is hereby authorized to charge any additional filing fees required under 37 CFR 1.16 or credit any overpayment to Eastman Kodak Company Deposit Account No. <u>05-0225</u> .								
A duplicate copy of this sheet is enclosed.								
John M. Blank								
Lynne M. Blank/ct	Lynne M. Blank/ct Attorney for Applicants							
Telephone: 585-477-7418 Registration No. 42,334								
Facsimile: 585-477-1148		1106	,		-, '			